

# Guidelines for Forming and Sustaining Human Resources for Health Stakeholder Leadership Groups

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These stakeholder leadership group (SLG) guidelines are intended to provide a practical, clear, and user-friendly set of actions that human resources for health (HRH) leaders at the country level can take to successfully launch and sustain SLGs. While these carefully selected recommended actions are drawn from evidence and extensive field experience, it is important to note that this is not a study, research report, or literature review. For those who are interested in more extensive studies or background reading, please see the list of references at the end of the guidelines.

A good place to begin is to address the question: What is an SLG, and why is it important for HRH? In practical terms, an HRH SLG consists of representatives from all of the key entities involved in planning, producing, managing, and supporting a country's health workforce. It is now well established that health workforce dynamics and challenges are far too complex and cut across too many organizational and sectoral lines to be handled by a single entity. Perhaps the best description of this comes from the World Health Report 2006 that focused on HRH, which states that taking action "necessitates that stakeholders work together through inclusive alliances and networks—local, national, and global—across health problems, professions, disciplines, ministries, sectors, and countries" (WHO 2006). If these alliances or SLGs are effective, their work together can result in a number of benefits (Gormley 2006; GFATM 2008; Reavely 2010).

While it may seem relatively straightforward to create the inclusive alliances and networks needed to realize these benefits, in practice it often turns out to be more difficult than one might anticipate. The recommended actions described in this resource are intended to raise the likelihood of forming an SLG that functions well, has a positive impact, and avoids or addresses typical difficulties. The guidelines are aimed at HRH champions at the country level. A champion is intended to be someone in a leadership position who sees the pressing need for an SLG to address a key HRH problem or set of problems. Such a person could be a ministry of health leader (e.g., human resources management director), an executive director from a nongovernmental organization (NGO) or faith-based organization (FBO), or a bilateral or multilateral HRH leader or supporter.

### BENEFITS OF EFFECTIVE HRH SLGS

- Increases the likelihood of successfully implementing new HRH initiatives that individual stakeholders might not be able to undertake on their own (especially given the complex web of actors that can help or impede action on any HRH intervention)
- Facilitates information and knowledge-sharing, which leads to overall HRH improvements and contributes to individual and organizational goals
- Expands capabilities to "do more with less," thereby enhancing what a single stakeholder's resource base usually permits
- Gains access to complementary areas of expertise, knowledge, skills, technology, and resources; increases likelihood of discovering new knowledge as well as the potential to lead through innovation
- Leverages resources and avoids duplication of investments and activities
- Accelerates momentum and mobilization of funding and resources by building a shared approach to address key HRH needs or issues that gains credibility and support
- Advocates for HRH across lines and raises the public profile of the challenge being addressed
- Redefines the relationships among government HRH stakeholders, and between government and a broad range of non-state actors.

The recommendations for forming and sustaining an effective HRH SLG that follow are arranged into six categories in a somewhat linear fashion, although it is likely that several actions may happen at the same time or actions may occur in a different sequence.

*Note: In some situations an existing SLG may be in place but may be bottlenecked by unresolved conflict or not functioning effectively for other reasons. While many of the recommendations in these guidelines will be useful in such cases, restarting or reenergizing an existing SLG requires some additional and different actions. A forthcoming publication will offer guidelines and recommendations for revitalizing and strengthening the performance of an existing SLG.*



The HRH champion (or champions working together, in some cases) starts the process by advocating for the formation of an SLG to address a critical HRH need or issue. This may be a more general HRH need (e.g., the development and implementation of a new HRH strategic plan) or a particularly acute and immediate problem (e.g., sustained or growing health worker turnover leading to a retention crisis). Typically, these initial SLG champions have come from HRH leaders in the ministry of health, often in partnership with a key donor who is interested in HRH and health systems strengthening.

During this getting-started phase, the following steps will be useful:

**Identify and engage strategic partners:** Effective SLGs require initial care to ensure they get started on the right foot. At the beginning, this includes individual conversations, some advocacy, and perhaps some cajoling, with certain key strategic partners that will help support and become core members of the SLG. Exactly who these key strategic partners might be will depend on the context and issues. For example, in a country where the health sector is largely state-driven, the short list of strategic partners might be chosen from the following: an HRH leader from the ministry of health, one from the ministry of education (or from a university or medical school), an FBO leader (in countries where FBOs play a significant role), and perhaps a donor given the growing bilateral and multilateral interest in health systems strengthening.

**Develop initial goals, membership, and possible funding support:** Part of what you will be doing in these initial conversations with strategic partners is building the SLG with collaborative input from the beginning. This includes refining the goals and potential membership list as well as identifying possible funding support for a small—but critical—secretariat function. The champion and the strategic partners need to keep in mind that once the group has its first meeting members will then become active participants in revisiting and refining goals, finalizing membership and operating procedures, and so on.

**Generate an inclusive list of members:** As you develop the potential membership list, you should consider those who have a stake in the issue or who could be important contributors or who could potentially block actions in certain areas. In terms of building the membership list, it is important to be inclusive at this point. For example, in countries in east and southern Africa, given the nature of the health sector, key players that affect HRH might include

representatives from some of the following: the ministries of health, education, local government, and finance; the public service commission (or equivalent); medical schools and training institutions; national FBOs and NGOs; the private sector; and professional associations. At the same time, there is a need to balance the principle of inclusion with the practicality of not letting the group become too large to be manageable or effective. Normally, an SLG dealing with key HRH needs or challenges will range from 15 to 30 participants, although this may change depending on the issue. With larger groups, a certain amount of the business can effectively be conducted using smaller working groups.

**Take actions that will help develop a partnership mentality:** All of the actions described above—if carried out well—will help to build the foundation for a partnership mentality. This means participants will develop enough trust to invest in working together to accomplish shared goals. This kind of collaboration is not always easy. There may not be many positive models for it in the participants' experience, which means people may have to change their normal behavior. Effective start-up actions will contribute to this trust-building process, and help create a partnership mentality that can then have short- and long-term benefits, helping stakeholders to work together to address specific issues as well as create more collaboration within the HRH context for the long term.

While there are clearly benefits to be realized from an effective SLG, there are also many potential pitfalls and reasons that SLGs either falter or fail. Getting things started right and helping to lay the groundwork for a partnership mentality will help address most of these potential SLG problems.



## PLANNING AND CONDUCTING THE INITIAL HRH STAKEHOLDER LEADERSHIP GROUP MEETING

The first SLG meeting will be of vital importance; in fact, it is so important that we have devoted this section wholly to the planning and implementation of this initial meeting. The overall aim of the meeting is to review and get agreement on the HRH need(s) or issue(s) the SLG will be addressing, and to refine the goals, membership, and operating principles. The meeting needs to be carried out in a participatory manner as it is abundantly clear that this approach “leads to better ownership, understanding, and adherence to [the SLG’s] processes and procedures” (GFATM 2008). To do this effectively requires a certain approach to shared leadership, which is described in more detail in the Leadership section below. Using this approach, the following actions are recommended for the first meeting:

### Before the Meeting

**Send out the agenda and meeting materials well in advance:** It is likely that the HRH leaders you will be inviting have many other demands on their time, so it is imperative to send out a meeting announcement well in advance of the event. The announcement should include the objectives of the meeting, a proposed agenda and logistics (time, address, etc.), and a concept note that includes the draft SLG goals, HRH issues to be addressed, invitees, and a brief explanation of the need for inclusion and a shared approach. It is also a good idea to ask for any suggestions or refinements to the draft materials as that signals an interactive process from the beginning.

### During the Meeting

**Review and refine or recast the SLG goals and membership:** Your work during the getting-started phase will result in a draft goal or set of goals and a proposed membership list. During this initial meeting, it is very important to allow sufficient time to discuss the issues at hand, and to solicit input into the proposed goals and make appropriate changes based on the input. Once there is general agreement on the goals, then the membership list can be discussed and adjusted appropriately to reflect the goals and further input from the group. It is especially important for the HRH champion who will be leading this meeting to encourage participation, ask good questions, listen respectfully, respond to suggestions appropriately, summarize agreements, and move the agenda forward. Arrangements should be made to keep note of the agreed-upon changes in the goals and membership list.

**Discuss and obtain agreement on key operating procedures:** After having agreed on goals and membership, it is appropriate to turn to discussing and obtaining agreement on some key initial operating procedures such as the following: meeting frequency, meeting times and location(s), sharing the agenda ahead of time, ways to communicate between meetings, what gets shared after each meeting, and who is going to carry out these operating procedures (these are described in more detail in the section below entitled Develop and Agree on Key Operating Procedures). This is the opportunity to discuss a secretariat function and/or secretariat funding. Depending on what the SLG core group has accomplished in the getting-started phase, you could announce that a small amount of funding is available for a secretariat, or that a lead organization (e.g., the ministry of health) is going to provide that function, or lead a discussion on how the function might get divided or otherwise accomplished. This is a very important matter as it is clear that SLGs without a secretariat function of some sort struggle and often fail.

### After the Meeting

Overall, transparency is a critical ingredient for effective SLG work, and good communication before, during, and after the meeting will help promote transparency. As soon as possible after the meeting, write up and send out the revised goals and membership list, operating procedure agreements, and any other action items or agreements that emerged from the deliberations. In addition, it is good to include a reminder about the next meeting date and place.

### REASONS WHY SLGS UNDERPERFORM

1. Absence of clear and explicit agreement on goals and objectives
2. When goals exist, the absence of any tracking mechanism to monitor progress against goals, and to make changes based on monitoring data
3. Failure to establish clearly specified and commonly understood roles and responsibilities, ways of working, and mechanisms for decision-making
4. Unresolved conflicts related to goals, approaches, and work styles
5. Leadership that either lacks the needed skills or fails to invest the time to effectively guide the collaboration
6. Inability to hold partners accountable to meet commitments and deadlines
7. Inattention to the process of building trust among partners
8. Lack of transparency about critical information and decision-making processes
9. Unhealthy competition among partners for resources and credit for accomplishments.

(Buse 2004); adapted from Gormley and Guyer-Miller 2007



## LEADERSHIP

Successful multistakeholder initiatives rarely succeed without good leadership. To be effective, SLG members need to agree on the nature of the HRH challenges or problems to be addressed and develop a compelling vision and strong sense of purpose. This is the glue that binds the SLG together and motivates members to devote the necessary time and energy required for results. It is important to build shared ownership of both the HRH challenges and desired outcomes from the very beginning. SLG leaders need to demonstrate their commitment to participatory and shared leadership. Leaders must see the potential of the SLG and communicate this vision in inspiring ways. They should understand and address the differing interests of each stakeholder entity and work to facilitate communication and interaction among these groups.

The Global Fund to Fight AIDS, Tuberculosis and Malaria has used the Country Coordinating Mechanism (CCM) as a cornerstone of its architecture since the organization was founded in 2001. Comprised of members from various stakeholder groups, CCMs have responsibility for submitting proposals for funding and overseeing grant implementation. A report on the CCM model emphasizes the importance of effective leadership. The report lists the following negative leadership characteristics that were found to be particularly problematic:

- Fails to manage both participation and multidisciplinary teamwork
- Is not clear about CCM role and responsibilities; does not separate these from the responsibilities of the grant implementers
- Does not competently handle strategic processes
- Does not lead with much enthusiasm or motivation
- Misses CCM meetings
- Dominates meetings, often insisting on own “agenda” rather than facilitating consensus (GFATM 2008).

### KEY LEADERSHIP COMPETENCIES

1. Articulates the vision for what the SLG can accomplish both within the SLG and to key outside audiences
2. Builds bridges between diverse parties with different interests, creating an atmosphere that fosters collaboration among stakeholder representatives
3. Rallies the right people at the right time to promote desired action
4. Maintains a vigilant focus on the ongoing activities of the SLG—“hands-on” and tactical without being dominating
5. Uses a network of contacts to expedite and promote the SLG
6. Broadcasts SLG successes and achievements
7. Exhibits sensitivity to the needs of all parties and conducts all interactions with diplomacy, tact, and objectivity
8. Encourages active participation by all at SLG meetings
9. Aims for consensus on major issues and listens actively to a range of viewpoints in service of finding the best way forward
10. Facilitates decision-making that is transparent, timely, and involves the right people for input
11. Plans and facilitates SLG meetings effectively—develops meeting agendas with input from all stakeholders and facilitates meetings in a timely, productive manner; ensures that minutes and documents are distributed on time
12. Ensures that information is actively shared and readily accessible by all members.

(Gormley and Guyer-Miller 2007)

Generally, SLG leadership is more effective when members share leadership where appropriate, not overly relying on any one person for all leadership functions. Leadership should be facilitative rather than directive, involving members in decisions, problem-solving, and planning. This encourages members to be willing and supportive participants, contributing to the work to be done and assisting leadership in a range of ways.



## DEVELOPING AND AGREEING ON KEY OPERATING PROCEDURES

SLG members should discuss and agree on key operating procedures that outline how the group will work together to accomplish the goals. These should be written and available to all members, especially new members who might not have been involved in the formation of the procedures. Having agreed-upon procedures helps both leaders and group members carry out their responsibilities. The following are the areas where written procedures are the most important:

**Finalize group membership/composition:** The purpose of an SLG is to involve organizations that have a stake in the HRH challenge at hand to join together and address the challenge more holistically. Groups that have diverse membership with a depth of varied experiences can increase the overall success and sustainability of the SLG by increasing the resources available to members and group activities while also expanding buy-in and ownership of group processes and results. At the same time, groups that have too many members can be cumbersome. It will be important for the initial members to carefully consider which additional groups should be invited to become members.

**Develop a mandate (terms of reference):** The purpose or mission of the SLG—its reason for existence and its vision of what is to be accomplished—should be written and accessible to members and even a larger audience when appropriate. These are often called terms of reference, and include the purpose/mission, goals, or vision of what the SLG will accomplish as well as membership and general responsibilities of group members.

**Make linkages to appropriate governing bodies:** SLGs often serve as an information-gathering and advisory body to facilitate the activities and needs of stakeholders and particularly the ministry of health. As such they are often well served by a formalized relationship between the SLG and the ministry (or other appropriate governing body) to facilitate the group’s authority, performance-monitoring, and long-term sustainability.

**Create a structure:** SLGs tend to increase buy-in and productivity of members and sustainability of the group when they have a flattened organizational structure and participatory deliberative processes, which allow members to contribute to the management, objectives, and achievements of the group (Reavely and Mgomella 2010). Groups that are not particularly large may have only a chair and co-chair making up the leadership structure. Larger groups, in addition to a chair and co-chair, often have an executive committee that performs leadership functions. Roles and responsibilities for leadership functions should be agreed upon, written, and accessible to all members. It is also customary to have smaller work groups (e.g., committees, task forces) that carry out portions of the work of the SLG and report back to the larger group. It will be important for the SLG as a whole to decide what smaller work groups are needed and how group members will be selected. Again, the roles and responsibilities of these smaller work groups should be written and accessible to all.

**Select leaders:** Beyond the initial HRH champion(s) who formed and helped launch the SLG, it may be necessary to formally select leader(s). In some situations SLG members decide collaboratively how they will select leaders and the term or length of time that a leader is expected to serve. In other situations where the SLG mandate is narrower and may exist for a limited time, the initial champion(s) may remain as leaders. Other groups rotate leadership periodically among the key stakeholder members. Whichever way leaders are to be selected, it is important for the members to discuss this openly and adopt the selection process that best fits their needs.

**Establish a process for decision-making:** In successful SLGs, members establish clear agreements on the way they will make decisions. While needing to be efficient, the decision-making process must allow for active participation, consensus-building, and transparency. In Global Fund CCM deliberations, ample time is spent in discussing, even debating, issues in service of working toward consensus. If consensus is not achieved in a reasonable amount of time, the group reverts to voting, using a show of hands for simple decisions and secret ballot for sensitive decisions.

**Run productive meetings:** Meetings are the principal way group members participate in the affairs and activities of the SLG and carry out their role as group members. Meetings are where group members create and maintain positive relationships. Effective groups hold meetings frequently enough to keep everyone engaged in carrying out the work, and the meetings are viewed by members as productive and engaging. Poorly led meetings and infrequent meetings often lead to low attendance and engagement, which in the end contributes mightily to an unsuccessful SLG. The following are good practices for ensuring that meetings are productive and well attended:

- Engage SLG members to develop a predictable schedule for when meetings will take place and where. Then send out two reminders—the first one should be far enough ahead to give members time to adjust their work schedules so they will be able to attend, and the second one a day or so before the meeting as a simple reminder.
- Along with the meeting notices, attach a proposed agenda with any individual action items that members are to have completed for the upcoming meeting. Meeting agendas remind members of what topics the meeting will address and can serve as a motivator for attendance.
- Facilitate meetings so that discussion and agenda items move along in a timely way. Managing group discussion so that all can participate without taking too much time or getting bogged down is a bit of an art form. Be clear about how long the meeting is intended to last, and manage the discussion so that it ends near the designated end time. Do not overload agendas with more topics than can be handled. Periodically invite group members to contribute ideas and advice for how to make the meetings as productive as possible.
- Take notes during the meetings of key actions or decisions, write them up, and circulate to all members as soon as possible after the meeting.



## ENSURING THE NECESSARY SUPPORT

### Establish Secretariat Support

There are a number of tasks that need to be carried out to ensure that SLGs can operate effectively and efficiently. Leaders and group members have other work responsibilities and pressures on their time and often cannot devote the time needed to take care of basic operations. There is strong evidence that SLGs need some sort of secretariat to handle these functions, and if this is not available, the SLG may fail entirely or find its sustainability threatened.

This secretariat can be one person or even two or three—whatever the work of the SLG requires. Secretariats handle these types of functions:

- Keeps the SLG calendar of meetings and dates when workplan deliverables are due both for the SLG itself and for the smaller work groups or task forces that form to handle particular activities
- Plans meetings, including generating and circulating agendas, arranging rooms, etc.
- Supports meetings as they happen, including keeping track of notes and key agreements
- Distributes meeting notes as soon as possible after meetings end
- Manages information so that transparency and accountability are encouraged; in many cases SLGs have a small website where information is stored and readily accessible to members and other constituencies
- Maintains a log of key decisions supported by notes from the SLG meetings
- Keeps the list of SLG membership and work group membership; ensures that contact information is accurate, up-to-date, and accessible to others.

In the Global Fund's system, CCM operations have improved substantially when secretariats were established to support their work. Studies in three countries showed that prior to establishing a CCM secretariat, members were bogged down with logistics and struggled with processing information. Cambodia's CCM is regarded as being highly functional due in part to a very active secretariat (GFATM 2008).

The role and responsibilities of the secretariat should be documented and available to all SLG members as well as the secretariat staff. This secretariat will need office support and an organizational home. Often the ministry of health provides this support but it can come from other organizations. Often donors will provide the financial support for the secretariat, as the costs are normally not excessive.

## Make Provisions for Other Support

To provide the SLG with the needed institutional authority to make recommendations, a formalized relationship with the national ministry of health should be established and ministry representatives should be included among the SLG leadership. However, the ministry of health should be very careful to be inclusive and not dominate the SLG operations or decisions. All stakeholders must feel valued and able to influence the direction of the group, and if the ministry of health or other powerful stakeholder is perceived as dominating, the overall effectiveness of the SLG will be lessened and the possibilities of unresolved conflict increased.

Some funding is normally needed by an SLG if it is to operate productively and sustainably. While the amount of money is not large, it is important. Resources are needed to pay for secretariat staff, meeting facilities, communication and website setup and maintenance, materials production, and occasional transportation costs. Funding support for SLG operations could come from the government—e.g., the ministry of health or a combination of the ministry and other key agencies. It could also come from donors. Diversified funding is preferable to one source as multiple finance streams can satisfy requirements for financial stability and safeguard the independence of the SLG itself.



Experience and evidence suggests that trust is perhaps the most critical component to ensuring that an SLG functions effectively. When members are less able to reach agreements collaboratively and share information and communicate transparently, members become more critical of one another and less trusting. Trust is built when members complete transactions successfully over time and demonstrate they are capable of fulfilling commitments (Merrill-Sands and Sheridan 1996). Developing and using good communication practices is an integral part of building trust among members. Good communication ensures that members can stay aware of and involved in the activities of the SLG and gain access to information readily and easily. Frequent and open information-sharing is important. Be transparent; put everything on the table.

The following are useful communication practices:

- Hold SLG start-up meetings in which communication practices are discussed and agreed upon
- Develop specific communication protocols but keep them reasonable; review their effectiveness and make adjustments when needed
- Keep member contact information up-to-date, especially e-mail addresses and cell phone numbers; check to see if members are receiving e-mails
- Notify members of upcoming meetings in a timely manner; send out agendas and other appropriate materials ahead of time
- Write up notes from meetings, distribute them, and keep them accessible to all members

- Keep a log of key decisions made and make it available to members
- Write up the agreed process to make decisions and keep this available to members; occasionally check with members to see if they feel decisions are actually being made in this manner
- Hold progress review meetings to monitor goal achievement, write up results and make available to all
- Encourage members to see themselves as representing the opinions and positions of others in their own organization or network and to communicate SLG outcomes to these audiences on a consistent basis
- Create a small, simple website (or wiki) where all documents can be stored and readily accessible to members and their organizations; provide enough secretariat support to maintain the website
- Budget for communication expenses.



An SLG is set up in order to address critical HRH issues that require interorganizational cooperation and to move toward goals that will make a significant health workforce contribution. To form and sustain the group requires a significant investment of time and resources. In order to ensure that this investment pays off, SLG leadership needs to facilitate a process to make sure the goals are clear, and build a simple monitoring and performance process from the beginning so the group can answer the questions: Are we getting our work done, and are we performing as we set out to perform? As noted in a recent SLG study, “[r]espondents consistently suggested that the SLG should establish clear objectives and processes to monitor the group’s activities that allow them to track the productivity of group outputs and their outcomes” (Reavely and Mgomella 2010). This will also help address two of the key reasons why SLGs fail—unclear goals and no way to measure performance or hold each other accountable.

### BUILDING THE CAPACITY OF SLG MEMBERS

In addition to setting clear goals, planning effectively, and monitoring progress, the long-term sustainability and performance of the SLG can be enhanced by continuing to build the capacity of members. Helpful capacity-building initiatives include:

- Conducting capacity-building workshops on relevant topics
- Building the group of diverse stakeholders into a vibrant network with common needs and challenges—enabling them to discover who has what resources (so they know who to contact) and how those resources have benefitted or been utilized by other participating members
- Carrying out group learning trips to other countries to share approaches and practices
- Creating a common platform of frameworks, concepts, and language that stakeholders can use in the exchange of information
- Strengthening a common group identity (team spirit) that can inspire collective approaches
- Consistently pointing out the synergy between SLG objectives and the needs and interests of participating stakeholder constituencies.

(Reavely and Mgomella 2010)

The following actions are recommended:

**Develop a simple workplan and monitoring process:** Soon after the formation and initial meeting of the SLG, a group or a subgroup needs to consider the goals, engage the whole group in a discussion about a simple workplan, and facilitate agreement on benchmarks or indicators and times when monitoring should be conducted. At that point, a written workplan can be developed and shared with the whole group, and members can in turn share this with key people in their home organizations.

**Use the benchmarks or indicators to monitor progress:** From time to time (as agreed upon by the group), use part of the SLG meeting to examine the workplan and use the benchmarks or indicators to assess progress against the goals. Celebrate those areas where progress is being made, and then either make adjustments where there are performance gaps or change the benchmarks if they have proven to be unrealistic or not appropriate.



The experience of the Capacity Project and CapacityPlus has shown the benefits of supporting the convention of national SLGs to oversee health workforce system strengthening efforts. Depending on the context, groups have taken on a range of key HRH issues, including strengthening human resources information systems, issues of regulation, continuing professional development, health worker production, retention, and much more. The practical guidelines in this report are designed to support the optimal functioning of these existing groups as well as to assist leaders in forming new SLGs in countries where they are needed. As a member of the Uganda SLG stated, “The three key words here are ownership, sustainability, and capacity-building” (Capacity Project 2009).

## REFERENCES

- Buse, Kent. 2004. Global health partnerships: Increasing their impact by improved governance. GHP Study Paper 5. London, UK: DFID Health Resource Centre. [http://www2.ohchr.org/english/issues/development/docs/WHO\\_5.pdf](http://www2.ohchr.org/english/issues/development/docs/WHO_5.pdf) (accessed December 13, 2010).
- Capacity Project. 2009. Planning, developing and supporting the health workforce: Results and lessons learned from the Capacity Project, 2004-2009. Chapel Hill, NC: Capacity Project. [http://www.capacityproject.org/images/stories/capacity\\_project\\_final\\_report.pdf](http://www.capacityproject.org/images/stories/capacity_project_final_report.pdf) (accessed December 13, 2010).
- Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM). 2008. Lessons learned in the field: Health financing and governance: A report on the Country Coordinating Mechanism Model. GFATM. [http://www.theglobalfund.org/documents/ccm/CCM\\_GlobalReport\\_2008\\_10\\_en.pdf](http://www.theglobalfund.org/documents/ccm/CCM_GlobalReport_2008_10_en.pdf) (accessed December 13, 2010).
- Gormley, Wilma and Laura Guyer-Miller. 2007. Partnership building: Practical tools to help you create, strengthen, assess and manage your partnership or alliance more productively. Chapel Hill, NC: Capacity Project. <http://www.capacityproject.org/images/stories/files/capacity%20project%20partnership%20building%20toolkit.pdf> (accessed December 13, 2010).
- Gormley, Wilma and Laura Guyer-Miller. 2006. Using collaborative approaches to reach human resources for health (HRH) goals. Technical Brief No. 4. Chapel Hill, NC: Capacity Project. [http://www.capacityproject.org/images/stories/files/techbrief\\_4.pdf](http://www.capacityproject.org/images/stories/files/techbrief_4.pdf) (accessed December 13, 2010).
- Merrill-Sands, Deborah and Bridgette Sheridan. 1996. Developing and managing collaborative alliances: Lessons from a review of the literature. Organizational Change Briefing Note No. 3. Boston, MA: Support Program in Organizational Change for the CGIAR Centers, Simmons Institute for Leadership and Change, Simmons College. <http://www.trg-inc.com/resources/DevManagingPartnership.pdf> (accessed December 13, 2010).
- Reavely, Erik and George Mgomella. 2010. CapacityPlus stakeholder leadership group study: Progress report and preliminary findings.
- World Health Organization (WHO). 2006. Working together for health: The World Health Report 2006. Geneva, Switzerland: World Health Organization. <http://www.who.int/whr/2006/en/> (accessed December 13, 2010).



CapacityPlus is the USAID-funded global project uniquely focused on the health workforce needed to achieve the Millennium Development Goals. Placing health workers at the center of every effort, CapacityPlus helps countries achieve significant progress in addressing the health worker crisis while also having global impact through alliances with multilateral organizations.

### The CapacityPlus Partnership



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